

children. But children are not the only ones for whom health coverage is a priority. There are still millions of people in this country who live below the poverty line who do not have coverage. Unfortunately, we often forget about these individuals.

Several States have led the way in innovation for expanding coverage through cost containment: Tennessee, Oregon, Rhode Island, Hawaii, and Arizona. My home State, Arizona, was the first to recognize that improved quality, better access and reduced costs could be achieved through the appropriate use of managed care as an integrated approach to health care for low income people.

These States have summoned the political will and marshaled their State resources to improve their health care programs while reducing both State and Federal costs. Many new States are now following the examples set by the pioneers and have filed statewide section 1115 waiver requests to move their programs into managed care.

In Arizona, 72 percent of the voters decided last fall that health care should be available to everyone under the poverty line. Arizona already covers children up to 133 percent over the poverty line. This means Arizona decided to cover the 50,000 men and women without children who live under the poverty line. This is their only hope of health care coverage.

Unfortunately, the administration has recently erected additional barriers to Arizona's initiative. In spite of the substantial savings documented by Health Care Financing Administration [HCFA] evaluators since the program began in 1982, more than enough to offset the cost of expanding coverage, the administration would not allow Arizona to reinvest these savings it achieved over a traditional fee-for-service program in expanded coverage. Nor will HCFA allow the State credit for their program's expected savings over the next 5 years.

States like Arizona which have successfully been operating under an 1115 Medicaid waiver should not be penalized for a change in Federal guidelines which occurred after the program began. No one is questioning whether these States have saved the Federal Government millions. Arizona, Tennessee, Hawaii, Rhode Island, and any other State with such a proven track record, should be allowed to use the managed care savings it achieved over a traditional fee-for-service program to expand coverage for their most vulnerable populations.

This important amendment assists States in providing access to health care for the most vulnerable populations.

#### MEDICAL RESEARCH

Mr. HARKIN. Mr. President, I would like to submit for the RECORD some of the many letters I have received in support of Senator D'AMATO's and my amendment to S. 947, the Balanced Budget Act of 1997, to create a medical

research fund. These letters show the widespread grassroots support for this amendment which would expand support for medical research above and beyond what is currently being done at the National Institutes of Health [NIH].

The people behind these letters understand what many recent studies have demonstrated—that investments in medical research can both save lives and lower Medicare costs through the development of more cost-effective treatments and by delaying the onset of illness. They understand that while health care spending devours nearly \$1 trillion annually, the United States devotes less than 2 percent of its total health care budget to health research. These letters are from people that understand the importance of increased funding for biomedical research. I ask unanimous consent that these letters in support of the medical research amendment be submitted for the RECORD.

There being no objection, the letters were ordered to be printed in the RECORD, as follows:

Thank you.

AMERICAN ASSOCIATION FOR  
CANCER RESEARCH, INC.,  
Philadelphia, PA, June 25, 1997.

Hon. TOM HARKIN,  
Hon. AL D'AMATO,  
Hon. ARLEN SPECTER,  
Hon. CONNIE MACK,  
Hon. TOM DASCHLE,  
Hon. BARBARA BOXER,  
Hon. JAY ROCKEFELLER.

DEAR SENATORS: Bluntly, while debate rages over the budget, 1 mother, father, brother, sister or friend dies every 57 seconds in this country from cancer.

On behalf of the 14,000 cancer researchers searching for treatments, cures and prevention weapons in this country and the 1.3 million people who get cancer every year, we urge you on in your quest to find more funding for research and education!

The medical research amendment you are proposing is essential to continue to find resources to support the growing underfunded research programs at the NIH.

It is essential amendments like this pass to support all of our efforts to build a healthy America.

Sincerely,

DONALD S. COFFEY, Ph.D.,  
President.

PARKINSON'S ACTION NETWORK,  
Santa Rosa, CA June 25, 1997.

Hon. TOM HARKIN,  
Hon. ARLEN SPECTER,  
Hon. CONNIE MACK,  
Hon. ALFONSE D'AMATO,  
Hon. JOHN D. ROCKEFELLER,  
Hon. BARBARA BOXER,  
Hon. TOM DASCHLE.

DEAR SENATORS: Thank you for your efforts to increase funds provided to the National Institutes of Health through the creation of a Health Research Fund.

A million Americans suffer from Parkinson's disease, a neurological disorder that causes increasing tremor, stiffness and slowness of movement, eventually leaving us unable to move or speak. I have lived with Parkinson's for ten years, watching Parkinson's increasingly disable me, and seeing others like former Congressman Mo Udall lose the battle to the point of total immobility. The human suffering that results from Parkin-

son's is immense and incalculable, but this condition also produces a fiscal nightmare: Parkinson's is estimated to cost at least \$25 billion a year in medical care, disability benefits, assisted living and lost productivity. The cost is so high because we typically live in a disabled state for a long time, and the battle against loss of function is ongoing and expensive.

Meanwhile, there is immense scientific promise, with Parkinson's described by scientists as "one of the brightest spots in brain research." Nonetheless, the research is in slow motion, stymied by inadequate funding: the federal research budget for Parkinson's totals only about \$30 million or \$30 per American afflicted. The current federal policy on Parkinson's wastes billions in public and private dollars coping with the effects of the disease, when millions of dollars could be put toward finding a cure.

The Congress is moving toward a dramatic reversal in this policy, by support for the Udall Parkinson's Research bill, which would authorize \$100 million to adequately invest in this research. The bill is co-sponsored by 57 Senators and 202 Congressmembers, and we expect to see it enacted very soon. This momentum could be derailed by the present allocation for health programs in the 1998 budget agreement. If not corrected this year in appropriations for the National Institutes of Health, the present funding disparity almost surely will continue, leaving the human and fiscal nightmare to go on unabated.

Your amendment can fix this funding problem, return fiscal sanity to this policy, and give hope to our struggling and desperate community today.

Thank you from the bottom of our hearts for your efforts.

Sincerely,

JOAN I. SAMUELSON,  
President, Parkinson's Action Network.

CYSTIC FIBROSIS FOUNDATION,  
Bethesda, MD, June 25, 1997.

Hon. THOMAS HARKIN,  
Hon. ALFONSE D'AMATO,  
Hon. ARLEN SPECTER,  
Hon. CONNIE MACK,  
Hon. THOMAS DASCHLE,  
Hon. BARBARA BOXER,  
Hon. JOHN ROCKEFELLER.

DEAR SENATORS: Today, there are more than 30,000 children and young adults in the United States suffering as a result of cystic fibrosis. There is a way to stop this—Medical Research.

Your amendment is vital to the support of finding treatments and ultimately the cure for this devastating disease.

Just at a time when there are so many possible breakthroughs, grants cannot be funded, contracts are not given, clinical trials go unfunded, and education programs do not begin.

As a nation, as parents, we simply cannot let nearly 80 percent of our research opportunities slip away or be delayed.

The one approved program that we do not fund may hold the cure.

Sincerely yours,

ROBERT J. BEALL, Ph.D.,  
President and CEO.

RESEARCH SOCIETY ON ALCOHOLISM,  
Austin, TX, June 24, 1997.

Hon. TOM HARKIN, Hon. ALFONSE D'AMATO,  
Hon. ARLEN SPECTER, Hon. CONNIE MACK,  
Hon. TOM DASCHLE, Hon. BARBARA BOXER,  
Hon. JOHN ROCKEFELLER,  
U.S. Senate,  
Washington, DC.

DEAR SENATORS: On behalf of the 1,100 members of the Research Society on Alcoholism, I am writing to unequivocally support the Medical Research Amendment. The